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(Re	questor's Name)	,
(Ad	dress)	
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PICK-UP	WAIT .	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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SIVISION OF CORPORATIONS

OF NOV -8 PM 1: 34

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COVER LETTER

TO:	Registration Division of 0					
SUBJ	ECT: THE	RIGHT SOLUTION	ON, LLC g Florida Limited Cor		<u> </u>	_
conve		icate of Conversion, A usiness Entity" into a	articles of Organiz	ation,	, and fees are submitted	to
Please	e return all cor	respondence concerni	ng this matter to:			
	UDIA TOF	(Contact Person)				07 NOV -8
		(Firm/Company) ORATE LAKES (Address)	BLVD SUITE	108	3	8 PM 1: 34
WES	STON, FL	33326				4
	(City, State and Zip Code)				
For fu	rther informat	ion concerning this ma	atter, please call:			
CLA	UDIA TOR		_at (954	<u>290</u>	0 5292	_
	(Name of Cont	act Person)	(Area Code	and Da	aytime Telephone Number)	
Enclos	sed is a check	for the following amo	unt:			
(\$25 for & \$125	0.00 Filing Fees r Conversion for Articles anization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Copy		\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Regist Division Cliftor 2661 F	ET ADDRES tration Section on of Corporat n Building Executive Cent lassee, FL 323	tions ter Circle	Registra Division P. O. Bo	ntion S n of C ox 63	Corporations	

Certificate of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this	
Certificate of Conversion is: THE RIGHT SOLUTION, INC # P0700	00102840
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a CORPORATION	
(Enter entity type. Example: corporation, limited partnership, sole proprietorshi general partnership, common law or business trust, etc.)	р,
first organized, formed or incorporated under the laws of FLORIDA	
(Enter state, or if a non-U.S. entity, the name of the country) on 09/17/2007	_
(Enter date "Other Business Entity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
THE RIGHT SOLUTION, LLC	0 =
(Enter Name of Florida Limited Liability Company)	STECRETA IIVISION OF
Page 1 of 2	- 유지 - F

Page 1 of 2

5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor m document is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days after the date this State; <u>AND</u> 2) must be the same as	
Signed this 31 day of OCTOBER	20,07	
Signature of Authorized Person:		
Printed Name: CLAUDIA TORO Title	PRESIDENT	_
Fees:		DIVISION OF NOV
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	ARY OF STATE ARY OF CORPORATION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE RIGHT SOLUTION, LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1820 N corporate lakes blvd., Suite 108	1820 N Corporate lakes blvd., Suite 108
WESTON, FL 33326	WESTON, FL 33326
	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Juan C Quintero

9222 W Atlantic Blvd #1312

Florida street address (P.O. Box NOT acceptable)

Coral Springs,FI 33071

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Agent's Signature (REQUIRED)

(CONTINUED)

Page 1\of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Managing Member MGR MGR CLAUDIA TORO 1820 N corporate lakes blvd., Suite 108 WESTON, FL 33326 MGR JUAN C QUINTERO 1820 N corporate lakes blvd., Suite 108 WESTON, FL 33326 (Use attachment if necessary) LE V: Effective date, if other than the date of filing: NAL) MECOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Typed or printed name of signee	Title:	Name and Address:
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	that the	facts stated herein are true.)
Filing Fees:	that the	facts stated herein are true.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)